

STATE OF WISCONSIN Division of Hearings and Appeals

In the Matter of

DECISION

PRELIMINARY RECITALS

Pursuant to a petition filed June 22, 2015, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03, to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a telephonic hearing was held on July 08, 2015, at Milwaukee, Wisconsin. At the request of petitioner, the record was held open until July 15, 2015 for petitioner to submit evidence whether he had Medicaid (MA) coverage prior to October 1, 2014 to the Department and DHA, and then for the Department to submit its response to DHA and petitioner by July 22, 2015.

The petitioner failed to submit any evidence to DHA by July 15, 2015 or even by the date of this decision. The Departmental representative, sent a July 22, 2015 letter to DHA indicating that the Department had not received any documents from petitioner, and that the Department confirmed that the petitioner was not enrolled in Medicaid on the dates of services (February 21, 2014 through September 9,2015), and thus was not eligible for any MA payment during that period.

The issue for determination is whether the Department correctly denied the petitioner's request for payment of his medical bills incurred during the period of February 21, 2014 through September 9, 2014, because the petitioner was not eligible for Medicaid coverage and benefits until October 1, 2014.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:



Respondent:

Department of Health Services 1 West Wilson Street, Room 651 Madison, Wisconsin 53703

By: Division of Health Care Access and Accountability
1 West Wilson Street
P.O. Box 309
Madison, WI 53701-0309

ADMINISTRATIVE LAW JUDGE:

Gary M. Wolkstein Division of Hearings and Appeals

FINDINGS OF FACT

- 1. Petitioner is a 54 year old resident of Milwaukee County.
- 2. The petitioner appears likely to have been eligible for Medicare during the period of February, 21, 2014 through September 9, 2014.
- 3. The petitioner incurred a total bill of \$553.53 from Wisconsin Bone and Joint, S.C. from his appointment on February 21, 2014, April 22, 2014, May 30, 2014, August 15, 2014, and September 9, 2014. See Exhibit 2.
- 4. The petitioner requested payment form the Wisconsin Medicaid program for his medical bills indicated in Finding of Fact #3 above.
- 5. The Department of Health Services sent a notice to the petitioner denying his request for Medicaid payment of the medical bills from Wisconsin Bone and Joint during the period of February, 21, 2014 through September 9, 2014 because petitioner was not enrolled in or receiving Medicaid benefits during those dates of services.
- 6. During the July 8, 2015 hearing or while the record was held open, the petitioner failed to submit any evidence to DHA or the Department to provide any evidence that he had MA coverage prior to October 1, 2014. See above Preliminary Recitals.
- 7. The Departmental representative, sent a July 22, 2015 letter to DHA indicating that the Department had not received any evidence or documents from petitioner, and that the Department confirmed that the petitioner was not enrolled in Medicaid on the dates of services (February 21, 2014 through September 9, 2015), and thus was not eligible for any MA payment during that period. However, stipulated that petitioner was eligible for Medicaid as of October 1, 2014. See above Preliminary Recitals.

DISCUSSION

The Bureau may only reimburse providers for medically necessary and appropriate health care services and equipment listed in Wis. Stat. §§ 49.46(2) and 49.47(6)(a), as implemented by Wis. Admin. Code Ch. DHS 107. Some services and equipment are covered if a prior authorization request is submitted and approved by the Bureau in advance of receiving the service. Finally, some services and equipment are never covered by the MA program.

In this case, the request for payment of the medical bills totaling \$553.53 from Wisconsin Bone and Joint was correctly determined to be a non-covered service because petitioner was not enrolled in the Medicaid program during that period. See Findings of Fact #3 - #5 above. During the July 8, 2015 hearing, petitioner was quite argumentative, but was unable to provide any evidence of his Medicaid eligibility during the period in question. While the record was held open, petitioner failed to submit any evidence to DHA by July 15, 2015 or even by the date of this decision. See above Preliminary Recitals. Accordingly, based upon the evidence in the hearing record, I must conclude that the Department correctly denied the petitioner's request for payment of his medical bills incurred during the period of February 21, 2014 through September 9, 2014, because the petitioner was not eligible for Medicaid coverage and benefits until October 1, 2014.

CONCLUSIONS OF LAW

The Department correctly denied the petitioner's request for payment of his medical bills incurred during the period of February 21, 2014 through September 9, 2014, because the petitioner was not eligible for Medicaid coverage and benefits until October 1, 2014.

THEREFORE, it is

ORDERED

The petition for review herein be and the same is hereby Dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received** within 20 days after the date of this decision. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, Madison, Wisconsin 53703, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison, Wisconsin, this 15th day of September, 2015

\sGary M. Wolkstein Administrative Law Judge Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on September 15, 2015.

Division of Health Care Access and Accountability